

STANDARD FORM 50
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR. - MISS - MRS. - FIRST - MIDDLE INITIAL - LAST)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE					
MR. JAMES C. GARRISON		11-20-21	F. B. I. 12067	7-24-51					
<i>This is to notify you of the following action affecting your employment:</i>									
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) (CORRECTION) SEPARATION-MILITARY REGULAR SERVICE		6. EFFECTIVE DATE 9:00 A. M. 7-24-51	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY						
FROM		TO							
Special Agent GS 10 \$5500 per annum		8. POSITION TITLE							
		9. SERVICE, GRADE, SALARY							
		10. ORGANIZATIONAL DESIGNATIONS							
		11. HEADQUARTERS							
<input checked="" type="checkbox"/>	FIELD	<input type="checkbox"/>	DEPARTMENTAL	12. FIELD OR DEPT'L	<input type="checkbox"/>	FIELD	<input type="checkbox"/>	DEPARTMENTAL	
13. VETERAN'S PREFERENCE					14. POSITION CLASSIFICATION ACTION				
NONE	S PT.	10 POINT	WWII	WWI	OTHER	NEW	VICE	I. A.	REAL.
	X	DISAB. WIFE WIDOW	X						
15. SEX	16. RACE	17. APPROPRIATION S. & E., FBI FROM: TO:			same	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF OATH (ACCESSIONS ONLY)	20. LEGAL RESIDENCE	
					yes			Louisiana	
APPROVED <i>J. E. Garrison</i> DIRECTOR, F. B. I.									
ADMIN. ASST. TO A. G. THE ASST. TO A. G.									
REMARKS This corrects REGULAR notification #6084 dated 7-24-51 to indicate salary as above instead of \$5000 per annum. No Leave. Indefinite LWOP since 1:30 P. M., 7-13-51. Mr. Garrison REGULAR expects to enter the United States Armed Forces. He has been advised concerning the duties of the position presently occupied by him. The REGULAR provisions of the Veterans' Preference Act of 1944 and/or the Selective Service Extension Act of 1950 have been complied with. Forwarding Address: Captain James C. Garrison 18th Field Artillery Group Fort Sill, Oklahoma.									
1. PERSONNEL		b6	b7C						

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR. - MISS - MRS. - FIRST - MIDDLE INITIAL - LAST)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE					
MR. JAMES C. GARRISON		11-20-21	F. B. I. 6084	7-24-51					
<i>This is to notify you of the following action affecting your employment:</i>									
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY						
SEPARATION-MILITARY SERVICE		9:00 A. M. 7-24-51							
FROM		TO							
Special Agent		8. POSITION TITLE							
GS 10 \$5000 per annum		9. SERVICE, GRADE, SALARY							
		10. ORGANIZATIONAL DESIGNATIONS							
		11. HEADQUARTERS							
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL					
13. VETERAN'S PREFERENCE									
NONE	5 PT.	10 POINT	VVN	VWI	OTHER	14. POSITION CLASSIFICATION ACTION			
		X	DIESEL	WIFE	WIDOW	X	NEW	VICE	I. A.
IS.	SEX	16. RACE	17. APPROPRIATION S. & E., FBI			18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	19. DATE OF OATH (ACCESSIONS ONLY)	20. LEGAL RESIDENCE	
		FROM: TO:	same			yes		Louisiana	
APPROVED <i>J. E. Garrison</i> DIRECTOR, F. B. I.					4945				
ADMIN. ASST. TO A.G. <i>J. E. Garrison</i> THE ASST. TO A.G.									
REMARKS <i>xxx No Leave. Indefinite LWOP since 1:30 P. M. 7-13-51. Mr. Garrison expects to enter the United States Armed Forces. He has been advised concerning the duties of the position presently occupied by him.</i>									
The provisions of the Veterans' Preference Act of 1944 and/or the Selective Service Extension Act of 1950 have been complied with.									
Forwarding Address: Captain James C. Garrison 18th Field Artillery Group Fort Sill, Oklahoma									
b6 b7C									
SIGNATURE OR OTHER AUTHENTICATION									

DEPARTMENT OF JUSTICE

NOTICE OF LEAVE WITHOUT PAY OR RETURN TO DUTY FROM LEAVE WITHOUT PAY

NO. 0 1477
FOR USE OF PERSONNEL OFFICE

I. EMPLOYEE NO.	2. EMPLOYEE NAME	3. DATE PREPARED
	Garrison, James C.	July 14, 1951
4. POSITION TITLE	5. SERVICE AND GRADE	6. SALARY
Special Agent, Field	GS 10	\$5000.00 per annum
7. BUREAU OR DIVISION	8. SECTION OR BRANCH	9. HEADQUARTERS
Federal Bureau of Investigation		
10. APPROPRIATION	II. DEPT. <input type="checkbox"/> FIELD <input checked="" type="checkbox"/>	
"Salaries and Expenses, FBI"		
12. L. W. O. P. — ONE MONTH OR LESS		
BEGINNING DATE AND HOUR	TERMINATING DATE AND HOUR	13. L. W. O. P. — ONE MONTH OR TERMINATION DATE UNKNOWN
		BEGINNING DATE AND HOUR
		1:30 p.m. (4 hours) 7-13-51
14. RETURN TO DUTY FROM L. W. O. P.*		
DATE AND HOUR OF RETURN TO DUTY	DATE LEAVE COMMENCED	Indefinite
15. REMARKS		SIGNATURE OF AUTHORIZING OFFICER <i>J. E. M. [Signature]</i>

Director, Federal Bureau of Investigation

Insufficient annual leave (Pending Military Service)

IMPORTANT:

1. THIS IS A COMBINATION LEAVE WITHOUT PAY REPORT FORM. ITEMS 2 THROUGH 11 AND ONE OF THE FOLLOWING 12, 13, OR 14 SHOULD BE FILLED IN BY THE PREPARING OFFICE. INITIAL PERIODS OF LWOP MAY NOT EXCEED 6 MONTHS.
2. USE THIS FORM FOR REPORTING ALL LWOP EXCEPT MILITARY AND DISCIPLINARY.
3. EMPLOYEES ENTERING MILITARY SERVICE SHOULD BE SEPARATED ON THE REGULAR PR FORM.
4. ITEM NO. 12, FILL IN THIS BLOCK WHEN THE PERIOD OF LWOP DOES NOT EXCEED ONE MONTH AND THE DATE OF TERMINATION IS KNOWN. THE EMPLOYEE WILL BE RESTORED TO THE PAY ROLL WITHOUT FURTHER ACTION AFTER THE TERMINATION OF THE LWOP.
13. FILL IN THIS BLOCK WHEN THE PERIOD OF LWOP IS IN EXCESS OF ONE MONTH OR TERMINATION DATE UNKNOWN:
NO TERMINATION DATE IS REPORTED SINCE ANOTHER NOTICE IS REQUIRED ON R. T. D. (SEE ITEM NO. 14).
14. FILL IN THIS BLOCK TO RESTORE AN EMPLOYEE'S NAME TO THE PAY ROLL AFTER HIS RETURN TO DUTY FROM LWOP IN EXCESS OF ONE MONTH OR PRIOR TO THE TERMINATING DATE ON PERIODS OF LWOP OF LESS THAN ONE MONTH.
5. USE ITEMS 12 OR 13 TO REPORT EXTENSIONS OF LWOP AND STATE UNDER REMARKS THE PREVIOUS DATES REPORTED.

1. Personnel

U. S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF INVESTIGATION
WASHINGTON 25, D. C.

STANDARD FORM 50
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1946

FORM APPROVED
BUDGET BUREAU NO. 50-R064

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR. - MISS - MRS. - FIRST - MIDDLE INITIAL - LAST)	2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE					
MR. JAMES C. GARRISON 313550	11-20-21	F.B.I. 17759	2-24-51					
<i>This is to notify you of the following action affecting your employment:</i>								
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)	6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY						
EXCEPTED APPOINTMENT	EOD 3-5-51	Schedule A Part 6.108 (E)						
FROM	8. POSITION TITLE	TO						
	Special Agent							
	9. SERVICE, GRADE, SALARY	GS 10 \$5000 per annum and per diem in accordance with existing regulations.						
	10. ORGANIZATIONAL DESIGNATIONS							
	11. HEADQUARTERS	b6 b7C						
<input type="checkbox"/> FIELD	DEPARTMENTAL	<input type="checkbox"/> FIELD	DEPARTMENTAL					
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION						
NONE	S.P.T.	10 POINT	WWII	WWI	OTHER	NEW <input checked="" type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>	ACTION tr. 1-21-51.	
		DISAB.	WIFE	WIDOW	X			
15. SEX	16. RACE	17. APPROPRIATION S. & E., FBI				18. SUBJECT TO C. S. RETIREMENT ACT 457 (YES-NO) <input checked="" type="checkbox"/> Yes	19. DATE OF OATH (ACCESSIONS ONLY) 3-5-51	20. LEGAL RESIDENCE La.
APPROVED						4577		
DIRECTOR, F. B. I. J. E. DeLoach								
ADMIN. ASST. TO A. G. THE ASST. TO A. G.								
REMARKS The provisions of the Veterans' Preference Act of 1944 and/or the Selective Service Extension Act of 1950 have been complied with.								
b6 b7C								
1. PERSONNEL								

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee

JUSTICE

(Department or agency)

F.B.I.

(Bureau or division)

WASHINGTON, D.C.

(Place of employment)

I, James E. Garrison, do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. _____, dated _____, 19_____, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

ENTRY ON DUTY MARCH 5, 1951

James E. Garrison
(Signature of appointee)

Subscribed and sworn before me this 5th day of March, A. D. 1951,
at Washington
(City)

b6
[SEAL] b7C

[Redacted]
300

(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)

BOX 781, LAUREL, MISSISSIPPI

2. (A) DATE OF BIRTH

NOV. 20, 1921

(B) PLACE OF BIRTH (city or town and State or country)

DENNISON, IOWA.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY

MRS. LYON GARDINER

(B) RELATIONSHIP

MOTHER

(C) STREET AND NUMBER, CITY AND STATE

BOX 781, LAUREL, MISS.

(D) TELEPHONE NO.

7639.

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (OTHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? YES NO

If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION	(2) TEMPORARY OR NOT	RELATIONSHIP	MARRIED	SINGLE
		(3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED			(Check one)	
		1. _____	_____			
		2. _____	_____			
		3. _____	_____			
		4. _____	_____			
		5. _____	_____			
		6. _____	_____			
		7. _____	_____			
		8. _____	_____			
		9. _____	_____			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X"
IN PROPER COLUMN

YES

NO

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

ITEM NO. WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?

6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?

If your answer is "Yes", give details in Item 10.

7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER RETIREMENT ACT OR ANY PENSION OR OTHER BENEFITS IN CONNECTION WITH MILITARY SERVICE?

If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service; amount of retirement pay, and under what retirement act; and rating, if retired from military or naval service.

8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?

If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.

9. SINCE YOUR 18TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED, OR IMPRISONED, OR PLACED ON PROBATION, OR HAVING YOU EVER BEEN SUBJECT TO THE PENALTIES OF LAW, OR BEING SUBJECT TO THE PENALTIES OF ANY LAW, POLICE REGULATION, OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)?

If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his satisfaction that this appointment would be in conformance with the Civil Service Act, applying Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability by comparison with any record of recent discharge or arrest, and particularly for the following:

(1) Identity of appointee.—The appointee's signature and handwriting are to be compared with the application and/or other pertinent papers. The physical appearance may be checked against the medical certificates. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) Age.—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) Citizenship.—The appointing officer is responsible for observing the citizenship requirements of the Civil Service Act. Under appropriate acts, Form 61 constitutes an affidavit for both purposes and is a reliable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) Members of Family.—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointments in the competitive service, no other member of such family is eligible for probational or permanent appointment in the same class or grade. This provision applies to veterans whose preferences are not subject to this requirement. The members-of-family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.